

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN5654AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/04/2011
NAME OF PROVIDER OR SUPPLIER HIGHLAND VILLAGE OF ELKO		STREET ADDRESS, CITY, STATE, ZIP CODE 2850 RUBY VISTA DR ELKO, NV 89801		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 5/4/11. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for 35 Residential Facility for Group beds for elderly and disabled persons, and provides assisted living services to Category II residents. The census at the time of the survey was 33. Ten resident files were reviewed and 10 employee files were reviewed.</p> <p>The facility received a grade of D.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 103 SS=F	<p>449.200(1)(d) Personnel File - NAC 441A / Tuberculosis</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.</p> <p>This Regulation is not met as evidenced by:</p>	Y 103		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 1 Based on record review on 5/4/11, the facility failed to ensure 4 of 10 employees complied with NAC 441A.375 regarding tuberculosis (TB) testing (Employee #1 - missing physical and 2 step TB skin test; #3 - missing 2 step TB skin test; #7 - missing annual TB skin test and #10 - missing results of 2nd step TB skin test). Severity: 2 Scope: 3	Y 103			
Y 105 SS=F	449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. This Regulation is not met as evidenced by: Based on record review on 5/4/11, the facility failed to ensure 2 of 10 employees met background check requirements of NRS 449.176 to 449.188 (Employee #2 - undecided background report and Employee #4 - rejection of State background report). Severity: 2 Scope: 3	Y 105			
Y 255 SS=F	449.217(6)(a)(b) Permits - Comply with NAC 446 on Food Service NAC 449.217 6. A residential facility with more than 10 residents must:	Y 255			

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Y 255	<p>Continued From page 2</p> <p>(a) Comply with the standards prescribed in chapter 446 of NAC.</p> <p>(b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division.</p> <p>This Regulation is not met as evidenced by: Based on observation, interview and record review on 5/4/11, the facility failed to ensure the kitchen complied with the standards of NAC 446.</p> <p>Findings include:</p> <p>1. Critical Violations:</p> <p>a. A carton of eggs were stored over multiple pitchers of juice in the single door reach-in refrigerator (Highland Village Pantry).</p> <p>2. Cleaning and Sanitation Issues:</p> <p>a. A container of food on the top shelf of the reach-in refrigerator was not labeled (Highland Village Pantry).</p> <p>b. A household microwave was observed in the Highland Village Pantry.</p> <p>c. A wet wiping cloth was not stored in sanitizer (Highland Village Pantry).</p> <p>d. The steam table cutting board was heavily</p>	Y 255			

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Y 255	<p>Continued From page 3</p> <p>soiled on its under-side (Highland Village Pantry).</p> <p>e. A pot of potatoes were stored on the floor in the walk-in refrigerator (Main Kitchen).</p> <p>f. Multiple food items were stored under the walk-in refrigerator condenser which was heavily soiled with dust and debris (Main Kitchen).</p> <p>g. Multiple food scoops were improperly stored in the flour and thickener containers (Main Kitchen).</p> <p>h. The dishwashing facilities were un-maintained with excess hard water scaling and had an exposed electrical outlet (Main Kitchen).</p> <p>i. There was no reading for the sanitizer in multiple wet wiping cloth solutions (Main Kitchen).</p> <p>j. The walk-in refrigerator shelving racks were soiled with dust and debris (Main Kitchen).</p> <p>k. The reach-in refrigerator interior fan was soiled (Main Kitchen).</p> <p>l. Three white cutting boards were "wet stacked" (Main Kitchen).</p> <p>m. Multiple vent covers throughout the kitchen, dry storage, and dishwashing hood area were excessively soiled (Main Kitchen).</p> <p>3. Equipment and Maintenance Issues:</p> <p>a. The drain pipe for the three compartment sink was in disrepair (Main Kitchen).</p> <p>Severity: 2 Scope: 3</p>	Y 255			

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Y 871	Continued From page 4	Y 871			
Y 871 SS=C	<p>NAC 449.2742(1)(d)(1-8)(1)(e) Medication Plan</p> <p>NAC 449.2742</p> <p>d) Develop and maintain a plan for managing the administration of medications at the residential facility, including, without limitation:</p> <p>(1) Preventing the use of outdated, damaged or contaminated medications;</p> <p>(2) Managing the medications for each resident in a manner which ensures that any prescription medications, over-the-counter medications and nutritional supplements are ordered, filled and refilled in a timely manner to avoid missed dosages;</p> <p>(3) Verifying that orders for medications have been accurately transcribed in the record of the medication administered to each resident in accordance with NAC 449.2744;</p> <p>(4) Monitoring the administration of medications and the effective use of the records of the medication administered to each resident;</p> <p>(5) Ensuring that each caregiver who administers a medication is in compliance with the requirements of subsection 6 of NRS 449.037 and NAC 449.196;</p> <p>(6) Ensuring that each caregiver who administers a medication is adequately supervised;</p> <p>(7) Communicating routinely with the prescribing physician or other physician of the resident concerning issues or observations relating to the administration of the medication; and</p> <p>(8) Maintaining reference materials relating to medications at the residential facility, including, without limitation, a current drug guide or medication handbook, which must not be more than 2 years old or providing access to websites on the Internet which provide reliable information</p>	Y 871			

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Y 871	Continued From page 5 concerning medications. (e) Develop and maintain a training program for caregivers of the residential facility who administer medication to residents, including, without limitation, an initial orientation on the plan for managing medications at the facility for each new caregiver and an annual training update on the plan. The administrator shall maintain documentation concerning the provision of the training program and the attendance of caregivers. This Regulation is not met as evidenced by: Based on record review and interview on 5/4/11, the administrator failed to prepare a medication plan that included all eight required components. Severity: 1 Scope: 3	Y 871			
Y 878 SS=E	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order.	Y 878			

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Y 878	Continued From page 6 This Regulation is not met as evidenced by: Based on record review and interview on 5/4/11, the facility failed to ensure 3 of 10 residents received medications as prescribed (Resident #1 - Alprazolam; Resident #2 - Methocarbamol; Resident # 6 - Amiodarone, Cranberry Extract and Nystatin Powder). Severity: 2 Scope: 2	Y 878			
Y 895 SS=E	449.2744(1)(b)(1) Medication / MAR NAC 449.2744 1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain: (b) A record of the medication administered to each resident. The record must include: (1) The type of medication administered; (2) The date and time that the medication was administered; (3) The date and time that a resident refuses, or otherwise misses, an administration of medication; and (4) Instructions for administering the medication to the resident that reflect the current order or prescription of the resident's physician. This Regulation is not met as evidenced by: Based on record review on 5/4/11, the facility	Y 895			

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Y 895	Continued From page 7 failed to ensure the medication administration record (MAR) was accurate for 3 of 10 residents (Resident #2, #4, and #10). Severity: 2 Scope: 2	Y 895			
Y 920 SS=D	449.2748(1) Medication Storage NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key. This Regulation is not met as evidenced by: Based on observation on 5/4/11, the facility failed to ensure medications administered by a resident who is capable of administering medication to himself without supervision were kept in a locked container (Resident #3 and #11).	Y 920			

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Y 920	Continued From page 8 Severity: 2 Scope 1	Y 920			
Y 936 SS=D	449.2749(1)(e) Resident file-NRS 441A Tuberculosis NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto. This Regulation is not met as evidenced by: Based on record review on 5/4/11, the facility failed to ensure 1 of 10 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #8 - missing 2 step TB skin test or evidence of positive PPD skin test and chest x-ray). Severity: 2 Scope: 1	Y 936			
Y1001 SS=F	449.2758(1) Training Req-Elderly Disabled NAC 449.2758 1. Within 60 days after being employed by a residential facility for elderly or disabled persons, a caregiver must receive not less than 4 hours of training related to the care of those residents.	Y1001			

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Y1001	<p>Continued From page 9</p> <p>2. As used in this section, " residential facility for elderly or disabled persons " means a residential facility that provides care to elderly or disabled persons who require assistance or protective supervision because they suffer from infirmities or disabilities.</p> <p>This Regulation is not met as evidenced by: Based on record review on 5/4/11, the facility failed to ensure that a minimum of 4 hours of training related to the care of elderly and disabled residents was provided and documented within 60 days of hire for 8 of 10 employees (Employee #1, #2, #3, #4, #5, #6, #7 and #9).</p> <p>Severity: 2 Scope: 3</p>	Y1001			

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